STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

JAN 25 2018

NEW HAMP	SHIRE
DEPARTMENT	OFSIAIE

PLEASE PRINT LARRY ALAN I. Name of Lobbyist(s) II. Name of lobbyist's partnership, firm or corporation, if any: TIDNUIDE MUTUAL JUSURANCE CONPANY AND AFFILIATES
(Name of partnership, firm or corporation) P.O. Box 558 STORRS CT Business Address: (Street) (Town/City) (State) Bloo 748-8751 (Bloo 231-2150 e-mail alan 16 nationwide com (Fax) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: NATIONWIDE MUTUAL INSURANCE COMPANY AND AFFINATES
(Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. April 26, 2017 July 26, 2017 IV. Date of Report activity from 4/1/17 to 6/30/17 activity from date of registration to 3/31/17 Reports cover: January 31, 2018 October 25, 2017 activity from 7/1/17 to 9/30/17 V. There have been no fees received and no reportable transactions made since the last report. \Box If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses ☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of Honorariums or Expense Reimbursement

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

☐ If you, your firm, or your family has made political contributions, you must file Addendum C-Political Contributions

(Signature of lobbyist)

RECEIVED

January 24, 2018

JAN 25 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) LARRY ALAN	
II. Name of lobbyist's partnership, firm or corporation, if any:	
NATIONWIDE MUTUAL INSURANCE COMPANY (Name of partnership, firm or corporation) III. Name of Client Nationwide Mutual UK, Co. ? Affiliates	AND AFFILIATES
III. Name of Client Nationwide Mutual US, Co. ? Affiliates	5 Date Jan, 24, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The gro reduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a)s 2,214.
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar ye	b) \$ 2, 378.
c) Total of all fees received to date (Add lines a and b)	c)\$ 4,502.
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$

V. Expenses:

Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.

a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	PAID Directly by Autionwide to a)\$ 5,000, Nutionwide to legislatine trackin firm.
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b)\$
c) Total of all itemized expenditures reported in detail in section VI.	os O.

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$ 5,000. e)\$ 5,000,
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$ 5,000,
f) Total of all expenses year to date	18 10,000.
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
Man	January 24, 2018
(Signature of lobbyist)	(Date)

LARRY ALAW (Print Name of lobbyist)